UNIVERSITY OF IRINGA (UoI)

(Formerly, Tumaini University Iringa University College)
POSTGRADUATE APPLICATION FORM



P.O.Box200, Iringa.Fax:(0)26 2720904:**Mobile No:+255743802615/+255677048774/+255717543476/+255743082615** Web: www.uoi.ac.tz E-Mail: admissions@uoi.ac.tz

Re: Application Materials

Dear Prospective Student,

Thank you for your interest in University of Iringa (UoI), formerly Tumaini University – Iringa University College. Attached are the necessary forms for applying to the various **Programmes**.

The following items must accompany your application for admissions before is processed:

- A Completed Application Form
- B **30,000**/= non-refundable application fee OR U.S. \$30.00 for foreigners
- C Certified copy of "O" Level Certificate, Certified copy of "A" Level Certificate (if any)
- D Certified copies of other Certificate(s)/Diploma(s) with Transcripts (if you have)
- E Completed Medical Examination Form (It is found at www.uoi.ac.tz).
- F 1 Passport-size photograph (taken within the past six months)
- G Certified copy of Birth Certificate (affidavits are not acceptable at all).

Minimum Entry Requirements

Holder of Bachelor Degree with a G.P.A of 2.7 and above.

Application fees should be deposited to: -

A/c Name: Tumaini University at Iringa, Local Collection A/C No CRDB A/C No. 01J1070671101 OR (NBC): 028-103-000-152, Forex Collection A/C No (NBC): 028-105-000-246

OR: LIPA Kwa M-Pesa: Company number (5669684): A/c Name: UNIVERSITY OF IRINGA

Please **write the name of the applicant** in whose respect the application fees are being paid on the bank **pay-in-slip**.

Regards,

Normasions Officer
Uniformly of Iringa

o o) Box 200

Mr. Mauna Belius Admissions Officer

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I. PERSONAL INFORMATION

First Name	Surname	
Middle Name	Region	
Gender	NIDA Number	
District	Country	
Date of Birth	Mobile Number	
Nationality	E-mail Address	

II. EDUCATION INFORMATION

O-Level School:	A-Level School:	A-Level School:	
Name of School	Name of School		
Index Number	Index Number		
Completion Year	Completion Year		
Postal Address	Postal Address		
Region	Region		
Diploma:	Degree:		
Name of Institute	Name of Institute		
	Name of the		
Name of the program	program		
GPA	GPA		
Completion Year	Completion Year		

V. FINANCIAL SUPPORT FOR STUDIES:

VIII WILL DOLL	OKI I OK BI EDIEB.
Name of Sponsor	
Address	
City/Region	
Country	
Phone Number	
E-mail Address	

VI. PERSONAL REFEREES

Write Names and addresses of two referees who are familiar with your academic ability and performance:

1. Contact Name	2. Contact Name	
Title	Title	
Postal Address	Postal Address	
Phone Number	Phone Number	
Mobile Number	Mobile Number	
Fax Number	Fax Number	
E-mail Address	E-mail Address	

VII. ACADEMIC PROGRAMMES

Indicate your preference using numbers 1, 2 and 3 against the respective programme.

	POSTGRADUATE PROGRAMME				
A.	A. MASTER PROGRAMMES				
1	Master of Education in Assessment and Evaluation (MEDU-AE)				
2	Master of Education in Curriculum Development and Teaching (MEDU-CDT)				
3	Master of Education in Policy, Planning and Administration (MEDU-PPA)				
4	Master of Arts in Community Development and Project Management (MA-CDPM)				
5	Master of Mission and Community Development (MMCD)				
В.	POSTGRADUATE DIPLOMA PROGRAMMES				
1	Post Graduate Diploma in Education (Administration) (PGDEA)				
2	Post Graduate Diploma in Education (Teaching) (PGDET)				

X. DECLARATION

I declare that the information and documents provided are true and correct to the best of my			
knowledge.			
Date	Signature of applicant		

XI. APPLICATION FEES PAYMENT

Application fees payments through LIPA Kwa M-Pesa Service to A/c No. (5669684) with the A/c Na	ne of
INIVERSITY OF IRINGA should indicate their M-Pesa /Transaction Code below:-	

M-PESA TRANSACTION	[CODE:
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Tembelea Huduma ya M-PESA (Lipa Kwa M-PESA):-

- 1. *150*00#
- 2. Bonyeza No. 4 LIPA KWA M-PESA
- 3. Bonyeza No.1 WEKA LIPA NAMBA (**5669684**)
- 4. KIASI (**30,000**)
- 5. NENO LAKO LA SIRI
- 6. THIBITISHA
- 7. JINA LA ACCOUNT UNIVERSITY OF IRINGA

XI. FOR OFFICIAL US	SΕ	ONLY	
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	Remarks	
	Fitle:	
Da	Date:	
	NOTE: . Course cannot be run unless it has 10 or more candidates.	
2	Plansa Attach	

- - Application fee payments slip receipt or M-PESA CODE.
 - Certified copies of "O" level, "A" level and other courses certificate and transcripts.
 - Duly completed medical examination form.
 - Passport-size photograph (taken within the past six months)
 - Certified Copy of Birth Certificate (affidavits are not acceptable)

UNIVERSITY OF IRINGA POSTGRADUATE STUDIES FEES STRUCTURE



P.O. Box200, Iringa.: **Mobile No:** +255743802615/ +255677048774/ +255745841055/ +255716183765

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POSTGRADUATE DIPLOMA PROGRAMME

SEMESTER/ITEM	First semester		Second Semester		Total
	Registration	2 nd Inst.	Registration	2 nd Inst.	
TUITION FEE	555,000	370,000	555,000	370,000	1,850,000
DIRECT COST	81,000	44,000	81,000	44,000	270,000
QUALITY ASSURANCE	20,000	-	-	-	20,000
TOTAL	656,000	414,000	636,000	414,000	2,140,000
DUE DATES	Nov. 11 th	Dec. 23 ^{ra}	Mar. 31 st	Jun. 03rd	

MASTERS – EVENING PROGRAMME

SEMESTER/ITEM	First Semester		Second Semester		Total
	Registration	2 nd Inst.	Registration	Registration	2 nd Inst.
TUITION FEE	600,000	400,000	600,000	400,000	2,000,000
DIRECT COST	66,000	44,000	66,000	44,000	220,000
QUALITY ASSURANCE	20,000	-	-	-	20,000
TOTAL	686,000	444,000	666,000	444,000	2,240,000
DUE DATES	Nov. 11th	Dec. 23 ^{ra}	Mar. 31 st	Jun. 03 rd	

MASTERS - FULL TIME PROGRAMME

SEMESTER/ITEM	First Semester		Second Semester		Total
	Registration	2 nd Inst.	Registration	2 nd Inst.	
TUITION FEE	1,200,000	800,000	1,200,000	800,000	4,000,000
DIRECT COST	81,000	54,000	81,000	54,000	270,000
QUALITY ASSURANCE	20,000	-	-	-	20,000
TOTAL	1,301,000	854,000	1,281,000	854,000	4,290,000
DUE DATES	Nov. 11th	Dec. 23 rd	Mar. 31 st	Jun. 03 rd	

Observe that:

- i. All payments except Hostel fees should be made through CONTROL NUMBER that will be communicated through your active **phone number** and **e-mail address** provided during your applications.
- ii. Those who do not have health insurance card will have to pay **Tshs. 50,400**/= upon arrival in the first semester following NHIF payment procedures. **TIKA** Cards are not accepted
- iii. Hostel fee for those who will stay on campus is Tsh. 378,000/= per annum. (Can be paid in two installments Tshs. 189,000/= per semester).
- **H** Make prior booking through the warden Office, Phone no: **0767370684/0715370684**before making payments. Hostel fees is paid through **different control number** upon student's confirmation.

NB:

- A Student Activity fee of Tshs. 18,000/= should be paid through Tumaini University Students Organization at NBC A/C NO. 028201025482 OR CRDB A/C NO. 0152243221600
- **B** There will be no other extensions or penalties for the students who fail to meet payments deadlines.

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